

ISSUE SLIP STAPLE AREA (for additional cross references)

10-25-00

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | JW | 7031 | |
| O.I.P.E. CLASSIFIER | JF | 45 | |
| FORMALITY REVIEW | FF | 829 | 9/25 |
| RESPONSE FORMALITY REVIEW | | | 10/25/10 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | 0 0 |
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| 10 | ✓ |
| 11 | ✓ |
| 12 | ✓ |
| 13 | ✓ |
| 14 | ✓ |
| 15 | 0 0 |
| 16 | ✓ |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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